Case 16-23754 Doc 1 Filed 07/25/16 Entered 07/25/16 13:00:39 Debtor 1 Sheila Document ... Page 1 of Pase number (if known) Part 6: Answer These Questions for Reporting Purposes 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) 16. What kind of debts as "incurred by an individual primarily for a personal, family, or household purpose." do you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are Do you estimate that paid that funds will be available to distribute to unsecured creditors? after any exempt property is excluded No. and administrative Yes. expenses are paid that funds will be available for distribution to unsecured creditors? **✓** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 50-99 5,001-10,000 50,001-100,000 do you estimate that 100-199 10,001-25,000 More than 100,000 you owe? 200-999 **✓** \$0-\$50.000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 350,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million 3500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your liabilities to be? \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true For you and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Sheila Smith Signature of Debtor 1 Signature of Debtor 2 Executed on ___7/25/2016 Executed on MM / DD / YYYY MM / DD / YYYY

Desc Main

Case 16-23754 Doc 1 Filed 07/25/16 Entered 07/25/16 13:00:39 Desc Main Page 2 of 74 Document Fill in this information to identify your case: Debtor 1 Sheila Smith First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) Case number (If known) Check if this is an Official Form 106Dec amended filing **Declaration About an Individual Debtor's Schedules** 12/15 If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Part 1: Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Signature of Debtor 2

MM/DD/YYYY

Date

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and

that they are true and correct.

MM/DD/YYYY

/s/ Sheila Smith
Signature of Debtor 1

Date 7/25/2016

| Debtor 1 | Case 16-23754 | | Filed 07/25/16 Document | Entered 07/25/16 13:00:39 Page 3 of 74se number (if known) | Desc Main |
|-----------------|--|--|--|--|--|
| 4 : | First Name | Middle Name | DOCUT Last Name | age 5 of 74 | |
| | hin 2 years before you filed for ditors, or other parties. | bankruptcy, did | you give a financial s | tatement to anyone about your business? I | nclude all financial institutions, |
| | No Yes. Fill in the details below. | | | | |
| | | • | Date issued | | |
| | Name | | MM/DD/YYYY | , | |
| | Number Street | | | | |
| | City State | Zip Code | The state of the s | | |
| Part 12: | Sign Below | | | | |
| | | | | erty, or obtaining money or property by frau to 20 years, or both. 18 U.S.C. §§ 152, 1341, | |
| | Signature of Debtor | 1 | | Signature of Debtor 2 | |
| | Date 7/25/2016 | | | Date | |
| Did y | ou attach additional pages to ` | Your Statement | of Financial Affairs fo | r Individuals Filing for Bankruptcy (Official | Form 107)? |
| | No | | | | |
| Emmed ground | ⁄es | | | | |
| Did y | ou pay or agree to pay someor | ne who is not an | attorney to help you t | ill out bankruptcy forms? | |
| [7] I | No | | | | |
| | Yes. Name of person | | | Attach the Bankruptcy Petition Declaration, and Signature (| • |
| | AND WINDS SHOULD BE AND A COURT OF A PART THE AND AND A SHOULD SHOULD BE A SHOULD BE AND | repairs a success according to the control of control o | ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~ | | $\frac{1}{2} \left(\frac{1}{2} \left(\frac{1}{2} \left(\frac{1}{2} \left(\frac{1}{2} \right) + \frac{1}{2} \left(\frac{1}{2} \left(\frac{1}{2} \right) + \frac{1}{2} \left(\frac{1}{2} \left(\frac{1}{2} \right) + \frac{1}{2} \left(\frac{1}{2} \right) + \frac{1}{2} \left(\frac{1}{2} \left(\frac{1}{2} \right) + \frac{1}{2} \left(\frac{1}{2} \left(\frac{1}{2} \right) + \frac{1}{2} \left(\frac{1}{2} \right) + \frac{1}{2} \left(1$ |

| Debi | | Case 16-23754 Sheila First Name | Doc 1 | Filed 07/25/16 Document | Entered 07/25/16 13:00:39 De Page 4 of 1946 e number (if known) | esc Main | | |
|---------|-------------|--|------------------|--------------------------------|--|-----------------|--|--|
| 16. Cal | | Ilculate the median family income that applies to you. Follow these steps: | | | | | | |
| | | Fill in the state in which you live. | | Illinois | | | | |
| | | Fill in the number of people in you | ur household. | 5 | | | | |
| | | Fill in the median family income for | | | | \$95,321.00 | | |
| | | _ | income amo | unts, go online using the li | nk specified in the separate instructions for this form. | This list may | | |
| 17. | How | do the lines compare? | | | | | | |
| | 17a. | Marketon | | | form, check box 1, Disposable income is not determini isposable Income (Official Form 122C-2). | ed under 11 | | |
| | 17b. | Asserted | d fill out Cal | culation of Disposable | k box 2, Disposable income is determined under 11 U. Income (Official Form 122C-2). On line 39 of that for | • | | |
| Part | 3: 0 | Calculate Your Commitme | nt Period | Under 11 U.S.C. §13 | 325(b)(4) | | | |
| 18. | Сор | y your total average monthly in | come from li | ne 11. | | \$2,108.69 | | |
| 19. | | · · | | | is not filing with you, and you contend that calculating our spouse's income, copy the amount from line 13. | the | | |
| | 19a. | If the marital adjustment does not | apply, fill in 0 | on line 19a. | | - <u>\$0.00</u> | | |
| | 19b. | Subtract line 19a from line 18. | | | | \$2,108.69 | | |
| 20. | Calc | ulate your current monthly inco | me for the y | ear. Follow these steps: | | | | |
| | 20a. | Copy line 19b. | | | | \$2,108.69 | | |
| | | Multiply by 12 (the number of mor | iths in a year). | | | x 12 | | |
| | 20b. | The result is your current monthly | income for th | e year for this part of the fo | orm. | \$25,304.28 | | |
| | 20c. | Copy the median family income for | or your state a | nd size of household from l | ine 16c. | \$95,321.00 | | |
| 21. | How | do the lines compare? | | | | | | |
| | | Line 20b is less than line 20c. Unle period is 3 years. Go to Part 4. | ss otherwise o | ordered by the court, on the | top of page 1 of this form, check box 3, The commitm | ent | | |
| | Street, and | Line 20b is more than or equal to lin commitment period is 5 years. Go to | | s otherwise ordered by the | court, on the top of page 1 of this form, check box 4, 7 | Γhe | | |
| Part | 4: 8 | Sign Below | | | | | | |
| | | By signing here, I declare under pe | analty of perjui | ry that the information on the | nis statement and in any attachments is true and correc | ct. | | |
| | O(1.00) | | | | | | | |
| | | ★ Is/ Sheila Smith Signature of Debtor 1 | hula | Jule | Signature of Debtor 2 | | | |
| | | Signature of Debtor 1 | | | Signature of Debtor 2 | | | |
| | | Date 7/25/2016 MM/DD/YYYY | | | Date MM/DD/YYYY | | | |
| | | | | | IVIIVIDD I I I I | | | |
| | | If you checked 17a, do NOT fill out If you checked 17b, fill out Form 12 | | | of that form, copy your current monthly income from lin | ne 14 above. | | |

Case 16-23754 Doc 1 Filed 07/25/16 Entered 07/25/16 13:00:39 Desc Main

Smith, Sheila

In re:

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| in re: | Smith, Sheila | Case No | |
|--------|---|--|----------|
| | Debtor(s) | | |
| | | Chapter. Chapter13 | |
| | VERIFICA | TION OF CREDITOR MATRIX | |
| Т | he above named Debtors hereby verify that t | the attached list of creditors is true and correct to the best of their knowle | dge. |
|)ate: | 7/25/2016 | /s/ Smith, Sheila Wheila Amil | <u>A</u> |
| | | Smith, Sheila | |

Signature of Debtor

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Revised as of 4/20/15)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.

- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate

tasks and functions for the attorney amd support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.

- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4000.00
- 2. In addition, the debtor will pay the filing fee required in the case of \$ 310.00
- 3. Before signing this agreement, the attorney has received, \$ 350.00 toward the flat fee, leaving a balance due of \$ 3650.00 ; and \$ 61.76 for expenses, leaving a balance due for the filing fee of \$ 310.00

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date: 7-25-16 | |
|---------------|----------------------------|
| Signed: | |
| | Mearille |
| Debtor(s) | Attorney for the Debtor(s) |

Do not sign this agreement if the amounts are blank.

Case 16-23754 Doc 1 Filed 07/25/16 Entered 07/25/16 13:00:39 Desc Main Page 12 of 74 Document Fill in this information to identify your case: United States Bankruptcy Court for the: Northern District of: Illinois Case number (if known) Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Check if this is an Chapter 13 amended filing Official Form 101 Voluntary Petition for Individuals Filing for Bankruptcy 12/15 The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case — and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Identify Yourself **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): Sheila 1. Your full name First name First name Write the name that is on your government-issued Middle name Middle name picture identification (for example, your driver's Smith license or passport Last name Last name Bring your picture Suffix (Sr., Jr., II, III) Suffix (Sr., Jr., II, III) identification to your meeting with the trustee. 2. All other names you have used in the last First name First name 8 years Middle name Middle name Include your married or maiden names. Last name Last name First name First name Middle name Middle name Last name Last name 3. Only the last 4 digits XXX - XX- 8520 XXX - XXof your Social OR Security number or

Taxpayer Identification number (ITIN)

federal Individual

9 xx - xx-

9 xx - xx-

Sheila Case 16-23754 Doc 1 Filed 07\$25/16 Entered 07\$25\$16 @300:39 Desc Main Debtor 1 Page 13 of 74 Documetht me **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): 4. Any business names I have not used any business names or EINs. I have not used any business names or EINs. and Employer Identification Business name Business name Numbers (EIN) you have used in the last 8 years Business name Business name Include trade names and EIN EIN doing business as names EIN EIN 5. Where you live If Debtor 2 lives at a different address: 5330 S. Wabash apt#3 Number Street Number Street 60615 Chicago Illinois City State Zip Code City State Zip Code Cook County County If your mailing address is different from the one above, fill If Debtor 2's mailing address is different from yours, fill it in it in here. Note that the court will send any notices to you at this here. Note that the court will send any notices to this mailing mailing address. address. Number Street Number Street City Zip Code State City State Zip Code 6. Why you are Check one: Check one: choosing this Over the last 180 days before filing this petition, I have lived district to file for Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. in this district longer than in any other district. bankruptcy I have another reason. Explain. (See 28 U.S.C. §§ 1408.) I have another reason. Explain. (See 28 U.S.C. §§ 1408.)

Debtor 1 Sheila Case 16-23754 Doc 1 Filed 07\$25/16 Entered @7\$25/16 @125/16 @125/16 Documentary Page 14 of 74

Tell the Court About Your Bankruptcy Case Part 2: 7. The chapter of the Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form **Bankruptcy Code** B2010)). Also, go to the top of page 1 and check the appropriate box. you are choosing to Chapter 7 file under Chapter 11 Chapter 12 Chapter 13 8. How you will pay the ☑ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local fee court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order... If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. 9. Have you filed for □ No. bankruptcy within the last 8 years? Yes. District Northern District of Illinois When 9/10/2013 Case number 13-35795 MM / DD / YYYY District Northern District of Illinois When 12/15/2015 15-16854 Case number MM / DD / YYYY District When Case number MM / DD / YYYY 10. Are any bankruptcy ✓ No. cases pending or being filed by a Yes, Debtor Relationship to you spouse who is not When District Case number, if known filing this case with MM / DD / YYYY you, or by a Debtor Relationship to you business partner, or District When Case number, if known by an affiliate? 11. Do you rent your No. Go to line 12. residence? Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? ✓ No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this bankruptcy petition.

Document Page 15 of 74 Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole ◪ No. Go to Part 4. proprietor of any full- or part-time Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. Chapter 11 of the If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow **Bankruptcy Code** statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). and are you a small business debtor? No. I am not filing under Chapter 11. For a definition of No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the small business debtor, Bankruptcy Code. see 11 U.S.C. § Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. 101(51D). Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have $\overline{}$ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Number Street that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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Sheila Case 16-23754

Doc 1

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Explain Your Efforts to Receive a Briefing About Credit Counseling

You must check one:

15. Tell the court whether you have received briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case):

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

I have a mental illness or a mental Incapacity.

deficiency that makes me incapable of realizing or making rational decisions

about finances.

Disability. My physical disability causes me to be

unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to

Active duty. I am currently on active military duty in a

military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions

about finances.

Disability. My physical disability causes me to be

unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to

Active duty. I am currently on active military duty in a

military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Doc 1 Page 17 of 74 Document not be a second of the contract of th **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) 16. What kind of debts as "incurred by an individual primarily for a personal, family, or household purpose." do you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? after any exempt property is excluded No. and administrative Yes. expenses are paid that funds will be available for distribution to unsecured creditors? **√** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 5,001-10,000 50,001-100,000 50-99 do you estimate that 10,001-25,000 More than 100,000 you owe? 100-199 200-999 **✓** \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion liabilities to be? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true For you and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. x /s/ Sheila Smith Signature of Debtor 2 Signature of Debtor 1 Executed on 7/25/2016 Executed on MM / DD / YYYY MM / DD / YYYY

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Megan Holmes | | Date | 7/25/2016 | |
|----------------------------------|----------|------|-----------------|----------------------|
| Signature of Attorney for Debtor | | | MM / DD / YY | YY |
| Megan Holmes | | | | |
| Printed name | | | | |
| Semrad Law Firm | | | | |
| Firm name | | | | |
| 11101 S. Western Avenue | | | | |
| Street | | | | |
| Chicago | Illinois | | | 60643 |
| City | State | | | Zip Code |
| Contact phone | | | Email address _ | mholmes@semradlaw.co |
| | | | Illinois | |
| Bar number | | | State | |

Case 16-23754 Doc 1 Filed 07/25/16 Entered 07/25/16 13:00:39 Desc Main

| Fill in this information to identify your case: | | | | | | |
|---|---------------------------|-------------|----------------------|--|--|--|
| Debtor 1 | Sheila | Sheila | | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if fili | ng) First Name | Middle Name | Last Name | | | |
| United States | Bankruptcy Court for the: | Northern | District of Illinois | | | |
| Case number (If known) | | | (State) | | | |

| Check if this is a |
|--------------------|
| amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct

| nformation. Fill out all of your schedules first; then complete the information on this form. If you are filing amended s your original forms, you must fill out a new Summary and check the box at the top of this page. | schedules after you file | |
|--|---|---|
| Part 1: Summarize Your Assets | | |
| | Your assets Value of what you own | |
| 1. Schedule A/B: Property (Official Form 106A/B) | \$0.00 | |
| 1a. Copy line 55, Total real estate, from Schedule A/B | \$42,019.00 | _ |
| 1b. Copy line 62, Total personal property, from Schedule A/B 1c. Copy line 63, Total of all property on Schedule A/B | \$42,019.00 |] |
| Part 2: Summarize Your Liabilities | | _ |
| | Your liabilities Amount you owe | |
| Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$30,517.00 | _ |
| 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) | \$500.00 | |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i> | \$35,649.38 | _ |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$66,666.38 | _ |
| Part 3: Summarize Your Income and Expenses | | _ |
| 4. Schedule I: Your Income (Official Form 106I) | | |
| Copy your combined monthly income from line 12 of Schedule I | \$2,737.18 | _ |
| Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22, Column A, of Schedule J | \$1,952.00 | _ |
| | | |

Sheila Case 16-23754 Doc 1 Filed 07\$25/16 Entered 07\$25\$16 @300:39 Desc Main Debtor 1 Page 20 of 74 **Answer These Questions for Administrative and Statistical Records** Part 4: 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$2,108.69 Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: From Part 4 on Schedule E/F, copy the following: **Total claim** \$0.00 9a. Domestic support obligations (Copy line 6a.) \$500.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)

\$0.00

\$0.00

\$0.00

\$500.00

9d. Student loans. (Copy line 6f.)

priority claims. (Copy line 6g.)

9g. Total. Add lines 9a through 9f.

9e. Obligations arising out of a separation agreement or divorce that you did not report as

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

Case 16-23754 Doc 1 Filed 07/25/16 Entered 07/25/16 13:00:39 Desc Main Fill in this information to identify your case: Debtor 1 Sheila Smith First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) Case number (If known) Check if this is an Official Form 106A/B amended filing Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? **✓** No. Go to Part 2 Yes. Where is the property? What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: 1.1 Single-family home Creditors Who Have Claims Secured by Property. Street address, if available, or other description Duplex or multi-unit building Current value of the Current value of the Condominium or cooperative entire property? portion you own? Manufactured or mobile home Number Street Describe the nature of your ownership Investment property interest (such as fee simple, tenancy by Timeshare the entireties, or a life estate), if known. Other City State Zip Code Check if this is community property Who has an interest in the property? Check one. (see instructions) Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: If you own or have more than one, list here: What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: 1.2 Single-family home Creditors Who Have Claims Secured by Property. Street address, if available, or other description Duplex or multi-unit building Current value of the Current value of the Condominium or cooperative entire property? portion you own? Manufactured or mobile home Number Street Describe the nature of your ownership Investment property interest (such as fee simple, tenancy by Timeshare the entireties, or a life estate), if known. City State Zip Code Check if this is community property Who has an interest in the property? Check one. (see instructions) Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another

property identification number:

Other information you wish to add about this item, such as local

| Debtor 1 Sheila Case 16-23754 Doc First Name Middle Nam | | െ ഏ3ം00: <u>39 Desc Main</u> | |
|---|---|--|--|
| 1.3 Street address, if available, or other description | Documatination Page 22 of 74 What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home | Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? Current value of the portion you own? | |
| Number Street City State Zip Code | Land Investment property Timeshare Other | Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. | |
| | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, | Check if this is community property (see instructions) | |
| | property identification number: or all of your entries from Part 1, including any entries here | | |
| | est in any vehicles, whether they are registered or not? I e, also report it on Schedule G: Executory Contracts and Unex orcycles | | |
| 3.1 Make <u>Buick</u> Model: <u>Vareno</u> Year: 2016 | Who has an interest in the property? Check one. Debtor 1 only | Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. | |
| Approximate mileage: 2333 Other information: 2016 Buick Vareno | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see | Current value of the entire property? \$24405.00 Current value of the portion you own? \$24405.00 | |
| 3.2 Make Model: Year: Approximate mileage: | instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only | Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. | |
| Other information: | Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) | Current value of the entire property? ——————————————————————————————————— | |

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|-----|--|---|---|---|--|
| | First Name Middle Name | Document Page 23 of 74 | | | |
| 3.3 | Make | Who has an interest in the property? Check | | laims or exemptions. Put | |
| | Model: | one. | the amount of any secured claims on Schedule D: | | |
| | Year: | Debtor 1 only | Creditors Who Have Cla | nims Secured by Property. | |
| | Approximate mileage: | Debtor 2 only | Current value of the | Current value of the | |
| | Other information: | Debtor 1 and Debtor 2 only | entire property? | portion you own? | |
| | | At least one of the debtors and another | | | |
| | | Check if this is community property (see | | | |
| | | instructions) | | | |
| 3.4 | Make | Who has an interest in the property? Check | Do not deduct secured cl | laims or exemptions. Put | |
| | Model: | one. | the amount of any secure | ed claims on Schedule D: | |
| | Year: | Debtor 1 only | Creditors Who Have Cla | nims Secured by Property. | |
| | Approximate mileage: | Debtor 2 only | Current value of the | Current value of the | |
| | Other information: | Debtor 1 and Debtor 2 only | entire property? | portion you own? | |
| | | At least one of the debtors and another | | | |
| | | Check if this is community property (see | | | |
| | | instructions) | | | |
| 4.1 | | Who has an interest in the property? Check | Do not deduct secured claims or exemptions. Put | | |
| | Model: | one. | the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. | | |
| | Year: Approximate mileage: | Debtor 1 only | Creditors Write Have Cia | airns Secured by Property. | |
| | Approximate mileage. | Debtor 2 only | Current value of the | | |
| | Other information: | Debtor 1 and Debtor 2 only | entire property? | Current value of the | |
| | | | entire property: | Current value of the portion you own? | |
| | | At least one of the debtors and another | ——— | | |
| | | At least one of the debtors and another Check if this is community property (see | entire property: | | |
| | | At least one of the debtors and another | entine property: | | |
| 4.2 | Make | At least one of the debtors and another Check if this is community property (see | Do not deduct secured cl | portion you own? laims or exemptions. Put | |
| 4.2 | Model: | At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. | Do not deduct secured cl | portion you own? laims or exemptions. Put d claims on Schedule D: | |
| 4.2 | Model: Year: | At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check | Do not deduct secured cl | portion you own? laims or exemptions. Put | |
| 4.2 | Model: | At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. | Do not deduct secured cl | portion you own? laims or exemptions. Put d claims on Schedule D: | |
| 4.2 | Model: Year: | At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only | Do not deduct secured cl the amount of any secure Creditors Who Have Cla | portion you own? laims or exemptions. Put ed claims on Schedule D: nims Secured by Property. | |
| 4.2 | Model: Year: Approximate mileage: | At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only | Do not deduct secured of the amount of any secure Creditors Who Have Cla | portion you own? laims or exemptions. Put ad claims on Schedule D: nims Secured by Property. Current value of the | |
| 4.2 | Model: Year: Approximate mileage: | At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | Do not deduct secured of the amount of any secure Creditors Who Have Cla | portion you own? laims or exemptions. Put ad claims on Schedule D: nims Secured by Property. Current value of the | |
| | Model: Year: Approximate mileage: Other information: | At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see | Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the entire property? | portion you own? laims or exemptions. Put ad claims on Schedule D: nims Secured by Property. Current value of the | |

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\$2600.00

Debtor 1 Page 24 of 74 **Describe Your Personal and Household Items** Part 3: Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No ✓ Yes. Describe... Misc. Furniture \$350.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Nο Yes. Describe... 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles **✓** No Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments **✓** No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... Misc. Clothing \$250.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver **~** No Yes. Describe... 13. Non-farm animals Examples: Dogs, cats, birds, horses **✓** No Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached

for Part 3. Write that number here

No

Yes. Describe...

Debtor 1 Sheila Case 16-23754
First Name

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| Do | you own or have a | ny legal or equitable inte | rest in any of the followin | g? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
|-----|---|--|---|-------------------------------|--|
| | ✓ No | e in your wallet, in your home, in a sa | afe deposit box, and on hand when y | ou file your petition Cash: | |
| 17. | | • | certificates of deposit; shares in cre unts with the same institution, list ea | | |
| | ✓ Yes | | Institution name: | | |
| | | 17.1. Checking account: | Chase | | \$14.00 |
| | | 17.2. Checking account: | | | |
| | | 17.3. Savings account: | | | |
| | | 17.4. Savings account: | | | |
| | | 17.5. Certificates of deposit: | | | |
| | | 17.6. Other financial account: | | | |
| | | 17.7. Other financial account: | | | |
| | | 17.8. Other financial account: | | | |
| | | 17.9. Other financial account: | | | |
| 18. | Examples: Bond funds, ir | or publicly traded stocks nvestment accounts with brokerage | firms, money market accounts | | |
| | ✓ No ☐ Yes | Institution or issuer name: | | | |
| | | | | | |
| | | | | | |
| 19. | an LLC, partnership, a | | ed and unincorporated business | ses, including an interest in | |
| | Yes. Give specific information about them | Name of entity | | % of ownership: | |
| | n ICI I I | | | | |
| | | | | | |

| Deb | tor 1 | Sheila Case 16 First Name | -23754 | Doc 1 | | <u>Entered</u> | k&;00: <u>39</u> | Desc Main |
|-----|-------------------------|--|-------------------|----------------------------------|--|---|------------------|--------------|
| 20. | Neg Non- | otiable instruments in | clude persona | al checks, cas you cannot tra | gotiable and non-negoti hiers' checks, promissory n nsfer to someone by signin | able instruments otes, and money orders. | | |
| 21. | Exar | irement or pension mples: Interests in IRA No Yes. List each account separately. | | unt: | 03(b), thrift savings accour | nts, or other pension or profit-sha | ring plans | |
| | | | Pension plar IRA: | n: | | | | |
| | | | Retirement a | account: | | | | |
| | | | Keogh: | | - | | | _ |
| | | | Additional ac | count: | | | | |
| | | | Additional ac | count: | | | | |
| 22. | Your Exar com | | eposits you ha | ave made so th | nat you may continue servic public utilities (electric, gas Institution name: | e or use from a company water), telecommunications | | - |
| | | Yes | Electric: | | | | | |
| | | 100 | | | - | | | _ |
| | | | Gas: | | - | | | |
| | | | Heating oil: | ooit on rontal . | | | | - |
| | | | Prepaid rent | osit on rental u | | | | _ |
| | | | Telephone: | • | | | | _ |
| | | | Water: | | | | | _ |
| | | | Rented furni | ture: | | | | _ |
| | | | Other: | turo. | - | | | |
| 23 | ۸nn | uuities (A contract for | | ment of mone | ey to you, either for life or fo | a number of vears) | | - |
| 23. | $\overline{\mathbf{A}}$ | No Yes | | and description | | a number of years) | | |
| | | | | | | | | |
| | | | | | - | | | |

| Debt | or 1 | Sheila Case 16 First Name | 5-23754 | Doc 1 Middle Name | Filed 07\$25/1 Document | 6 <u>Entered</u> | 166 /1163io0: <u>39</u> | Desc Main |
|------|---|--|-------------------|----------------------|---|------------------------------------|-------------------------|--|
| 24. | Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). | | | | | | | |
| | | No Institution | n name and de | escription. Sep | arately file the records | of any interests.11 U.S.C. § 521 | (c): | |
| 25. | | ısts, equitable or fu ercisable for your be | | s in property | (other than anything | listed in line 1), and rights o | r powers | |
| | | No Yes. Describe | | | | | | |
| 26. | Exa | | | | and other intellectual ds from royalties and lid | | | |
| 27. | Lic | Yes. Describe enses, franchises, | and other ge | neral intangih | oles | | | |
| | | | | | | dings, liquor licenses, profession | onal licenses | |
| | | • | | | | | | |
| Mor | ney | or property ow | ed to you? | | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28. | Тах | refunds owed to yo | u | | | | | |
| | ✓ | No | | | | | | |
| | | Yes. Give specific inf | | | | | Federal: | \$0.00 |
| | | about them, inc you already file | | r | | | State: | \$0.00 |
| | | and the tax yea | rs | | | | Local: | \$0.00 |
| 29. | Exar | | np sum alimor | ny, spousal sup | pport, child support, mai | ntenance, divorce settlement, pr | roperty settlement | |
| | | No | · | | | | Alimony: | \$0.00 |
| | _ | Yes. Give specific inf | ormation | | | | Maintenance: | \$0.00 |
| | | | | | | | Support: | \$0.00 |
| | | | | | | | Divorce settlement: | \$0.00 |
| | | | | | | | Property settlement | : \$0.00 |
| 30. | | | , disability insu | | nts, disability benefits, s made to someone else | ck pay, vacation pay, workers' o | ompensation, | |
| | ✓ | No | | | | | | |
| | | Yes. Describe | | | | | | |

| Debt | tor 1 | Sheila Case 10 First Name | <u>6-23754</u> | Doc 1 Middle Name | Filed 07\$25/16 Document | Entered @7425/6 Page 28 of 74 | 16 /13 00: <u>39 D</u> | esc Main |
|------|--------|--|-------------------|----------------------|--|----------------------------------|------------------------------|--|
| 31. | | rests in insurance mples: Health, disab | • | rance; health | | redit, homeowner's, or rente | r's insurance | |
| | | No Yes. Name the insur of each policy and li | | | Company name: | | Beneficiary: | Surrender or refund value: |
| 32. | If you | | of a living trust | | meone who has died ceeds from a life insurance | policy, or are currently entitle | d to receive | |
| 33. | | | | | u have filed a lawsuit or r | nade a demand for paymen | nt | |
| | | No | Personal Injury | | | | | \$15000.00 |
| 34. | | er contingent and et off claims | unliquidated | claims of ev | very nature, including co | ounterclaims of the debtor | and rights | |
| | H | No Yes. Describe | | | | | | |
| 35. | _ | financial assets yo | ou did not alre | ady list | | | | |
| | | Yes. Describe | | | | | | |
| 36. | | | - | | | ries for pages you have att | | \$15014.00 |
| Part | 5: | Describe Any E | Business-Ro | elated Pro | operty You Own or F | ave an Interest In. Li | st any real estate ir | n Part 1. |
| 37. | Do y | ou own or have ar | ny legal or equ | uitable intere | est in any business-relat | ed property? | | |
| | | No. Go to Part 6. Yes. Go to line 38. | | | | | | Current value of the portion you own? Do not deduct secured claims or exemptions |
| 38. | _ | ounts receivable o | commissions | s you alread | ly earned | | | |
| | = | No Yes. Describe | | | | | | |
| 39. | Exar | | | | nodems, printers, copiers, f | ax machines, rugs, telephone | es, desks, chairs, electroni | c devices |
| | | No Yes. Describe | | | | | | |

| Deb | tor 1 Sheila Case 16 | <u>6-23754 D0C 1</u> | Filed 0/\$25/16 | Entered was by | ь бо <i>(idkidsid</i>) U: <u>39</u> D | <u>esc Main</u> | |
|-------|---|--|--|----------------------------|--|--------------------------------------|-------------|
| 40. | First Name Machinery, fixtures, eq | Middle Name uipment, supplies you u | DOCUMETATE se in business, and tools o | Page 29 of 74 f your trade | | | |
| | ✓ No | | | | | | |
| | Yes. Describe | | | | | | |
| 41. | Inventory | | | | | | |
| | ✓ No | | | | | | |
| | Yes. Describe | | | | | | |
| 42. | Interests in partnershi | ips or joint ventures | | | | | |
| | ✓ No | | | | 0/ / | | |
| | Yes. Give specific information about them | | Name of entity: | | % of ownership: | | |
| | ulem | | | | | | |
| 43. (| Customer lists, mailing | lists, or other compilation | ons | | | | |
| | ✓ No | | | | | | |
| | | clude personally identifiabl | e information (as defined in 11 | U.S.C. § 101(41A))? | | | |
| | — No | | | | | | |
| | Yes. Descr | ibe | | | | | |
| 11 | Any by since related m | anamantu vari did mat alua. | advillat | | | | |
| 44. | | property you did not alrea | ady list | | | | |
| | ✓ No Yes. Give specific | | | | | | |
| | information | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | - | ort 5, including any entries f | or pages you have attacl | ned | | |
| or P | art 5. Write that number | here | | | ▶ | | |
| Part | | Farm- and Commerc n interest in farmland, list it i | ial Fishing-Related Property of the Property o | operty You Own or I | lave an Interest In | | |
| 46. | Do you own or have a | ny legal or equitable inte | rest in any farm- or comme | rcial fishing-related prop | erty? | | |
| | No. Go to Part 7. | | | | | Current value portion you ov | |
| | Yes. Go to line 47. | | | | | Do not deduct s claims or exemptions | |
| 47. | Farm animals Examples: Livestock, pour | ultry, farm-raised fish | | | | | |
| | No | , .aa.əəa nən | | | | | |
| | Yes. Describe | | | | | | |
| | | | | | | | |

| Deb | tor 1 | Sheila Case 16-237 | 54 Doc 1 Middle Name | | Entered 07/25/116/113:00:39 Page 30 of 74 | Desc | Main |
|--------------|----------|---|-------------------------|----------------------------|---|--------|--------------|
| 48. | Cro | ps-either growing or harve | ested | Boodinione | . ago co o | | |
| | ✓ | No | | | | | |
| | | Yes. Describe | | | | | |
| 49. | Farı | m and fishing equipment, i | mplements, machi | inery, fixtures, and tools | of trade | | |
| | ✓ | No | | | | | |
| | | Yes. Describe | | | | | |
| 50. | Farı | m and fishing supplies, che | emicals, and feed | | | | |
| | ✓ | No | | | | | |
| | | Yes. Describe | | | | _ | |
| 51. | Any | farm- and commercial fish | ning-related proper | ty you did not already lis | st | | |
| | V | No | | | | | |
| | | Yes. Describe | | | | | |
| | | | | | | | |
| | | | | | for pages you have attached | | |
| | ui t 0. | With that named here | | | | | |
| | | | | | | | |
| Part | 7: | Describe All Property | You Own or Ha | ave an Interest in Th | nat You Did Not List Above | | |
| 53. | | ou have other property of mples: Season tickets, country | | ot already list? | | | |
| | ✓ | | , стад ттотта стептр | | | | |
| | _ | Yes. Give specific | | | | | |
| | _ | information | | | | | |
| | | | | | | | <u>-</u> |
| | | | | 7 Marie di | | | |
| 54. A | dd th | e dollar value of all of your | r entries from Part | 7. Write that number her | e | • | |
| | | | | | | | |
| Part | 8. | List the Totals of Eacl | h Part of this F | orm | | | |
| | | | | | | | |
| 55. F | Part 1 | : Total real estate, line 2 | | | ······ | | |
| 56. r | oart 2 | total vehicles, line 5 | | \$24405.0 | 0 | | |
| 57. P | art 3: | : Total personal and house | hold items, line 15 | \$2600.00 | | | |
| 58. P | art 4: | : Total financial assets, line | 36 | \$15014.0 | 0 | | |
| 59. F | Part 5 | : Total business-related pr | roperty, line 45 | | | | |
| 60. F | Part 6 | : Total farm- and fishing-re | elated property, lin | e 52 | | | |
| 61. F | Part 7 | : Total other property not I | listed, line 54 | | | | |
| 62. 7 | Γotal | personal property. Add line: | s 56 through 61 | \$42019.0 | 0 | | + \$42019.00 |
| | | | | <u> </u> | Copy personal property to | otal ▶ | |
| | | | | | | | \$42019.00 |
| 63. T | otal c | of all property on Schedule | A/B. Add line 55 + | line 62 | | | |

Debtor 1 Sheila Case 16-23754 Doc 1 Filed 07\$25/16 Entered @7\$25/16 (126:00:39 Desc Main First Name Document Page 31 of 74

Schedule A/B: Property. Additional page

| Part3: Describe Your Personal and Household Items | | | | | | | | | |
|---|--|---|--|--|--|--|--|--|--|
| Do you own or h | ave any legal or equitable interest in any of the following items? | Current value of the portion you own? Do not deduct secured claims or exemptions. | | | | | | | |
| 6.2. Household goo | 6.2. Household goods and furnishings | | | | | | | | |
| ☐ No | | | | | | | | | |
| Yes. Describe | Bedroom set | \$1500.00 | | | | | | | |
| 6.3. Household goods and furnishings | | | | | | | | | |
| ✓ Yes. Describe | Couches | \$500.00 | | | | | | | |
| | | φ300.00 | | | | | | | |

Case 16-23754 Doc 1 Filed 07/25/16 Entered 07/25/16 13:00:39 Desc Main Fill in this information to identify your case: Debtor 1 Sheila Smith First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) Case number (If known) Check if this is an Official Form 106C amended filing Schedule C: The Property You Claim as Exempt 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known). For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount. Part 1: Identify the Property You Claim as Exempt Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) For any property you list on Schedule A/B that you claim as exempt, fill in the information below. Brief description of the property and line Current value of Amount of the exemption you claim Specific laws that allow exemption on Schedule A/B that lists this property the portion you Check only one box for each exemption. own Copy the value from Schedule A/B Brief 735 ILCS 5/12-1001(a) \$250.00 description: Misc. Clothing $\overline{\mathbf{v}}$ I ine from 100% of fair market value, up to any Schedule A/B: applicable statutory limit Brief 735 ILCS 5/12-1001(b) \$350.00 description: Misc. Furniture \$0 Line from 100% of fair market value, up to any Schedule A/B: 06 applicable statutory limit Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

No Yes

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Filed 07ଛ୍ଡେମ୍ବର Entered ଦ୍ୟକ୍ତିଶ୍ୱରି ଶିଷ୍ଟ ଅଧିକ ପର୍ଥ Desc Main Docume Page 33 of 74

| t 2: Addition | nal Page | | | | | |
|--|--|---|---|------------------------------------|--|--|
| • | ion of the property and line A/B that lists this property | Current value of the portion you own Copy the value from Schedule A/B | Amount of the exemption you claim Check only one box for each exemption. | Specific laws that allow exemption | | |
| Brief description: Line from Schedule A/B: | Bedroom set | \$1,500.00 | 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) | | |
| Brief description: Line from Schedule A/B: | Couches 06 | \$500.00 | 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) | | |
| Brief description: Line from Schedule A/B: | Personal Injury Lawsuit | \$15,000.00 | \$0 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(h)(4) | | |
| Brief description: Line from Schedule A/B: | <u>Chase</u> 17 | \$14.00 | \$0 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) | | |
| Brief description: Line from | Buick, Vareno, 2016, 2016 Buick Vareno | \$24,405.00 | 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(c) | | |

Case 16-23754 Doc 1 Filed 07/25/16 Entered 07/25/16 13:00:39 Desc Main Fill in this information to identify your case: Debtor 1 Sheila Smith First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) Case number (If known) Check if this is an Official Form 106D amended filing Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. List All Secured Claims Column B Column C List all secured claims. If a creditor has more than one secured claim, list the creditor separately for Column A each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much Amount of claim Value of collateral Unsecured as possible, list the claims in alphabetical order according to the creditor's name. Do not deduct the that supports portion value of collateral. this claim If any Santander Consumer USA \$24,405.00 \$26,517.00 \$2,112.00 Describe the property that secures the claim: Creditor's Name PO Box 961245 073 Automobile Number Street As of the date you file, the claim is: Check all that apply. Contingent Fort Unliquidated 76161 Worth Texas State ZIP Code Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or Debtor 2 only secured car loan) Debtor 1 and Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and Judgment lien from a lawsuit Check if this claim relates to a community debt Other (including a right to offset) Date debt was incurred 9/1/2015 1000 Last 4 digits of account **American First Financial** \$1,500.00 \$3,000.00 \$1,500.00 Describe the property that secures the claim: Creditor's Name 3515 N Ridge Rd Bedroom set | Value: \$1,500.00 Number Street As of the date you file, the claim is: Check all that apply. Contingent Wichita Kansas 67205 Unliquidated City Who owes the debt? Check one. Disputed Debtor 1 only Nature of lien. Check all that apply. Debtor 2 only An agreement you made (such as mortgage or Debtor 1 and Debtor 2 only secured car loan) At least one of the debtors and Statutory lien (such as tax lien, mechanic's lien) another Judgment lien from a lawsuit Check if this claim relates to a community debt Date debt was incurred Other (including a right to offset) Last 4 digits of account number Add the dollar value of your entries in Column A on this page. Write that number \$29,517.00

page 1

here:

Official Form 106D

Debtor 1 Sheila Case 16-23754 Doc 1 Filed 07\$25/16 Entered 07\$25\$16 @300:39 Desc Main Document Page 35 of 74 **Additional Page** Column A Column B Column C Part:1 After listing any entries on this page, number them beginning with 2.3, followed by Amount of claim Value of collateral Unsecured 2.4, and so forth. Do not deduct the that supports portion value of collateral. this claim If any Simple Finance 2.3 \$1,000.00 \$500.00 \$500.00 Describe the property that secures the claim: Creditor's Name 1225 Fort Union Blvd #300 Couches | Value: \$500.00 Number As of the date you file, the claim is: Check all that apply. Contingent Utah 84047 Midvale Unliquidated ZIP Code State City Who owes the debt? Check one. Disputed Debtor 1 only Nature of lien. Check all that apply. Debtor 2 only An agreement you made (such as mortgage or secured Debtor 1 and Debtor 2 only At least one of the debtors and Statutory lien (such as tax lien, mechanic's lien) another Judgment lien from a lawsuit Check if this claim relates to a Other (including a right to offset) community debt Date debt was incurred Last 4 digits of account number Add the dollar value of your entries in Column A on this page. Write that number \$1,000.00 If this is the last page of your form, add the dollar value totals from all pages. \$30,517.00

Write that number here:

Case 16-23754 Doc 1 Filed 07/25/16 Entered 07/25/16 13:00:39 Desc Main Fill in this information to identify your case: Debtor 1 Sheila Smith Middle Name First Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: District of Illinois Northern (State) Case number (If known) Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims Do any creditors have priority unsecured claims against you? No. Go to Part 2. ✓ Yes. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total **Priority** Nonpriority claim amount amount Illinois Department of Revenue \$500.00 \$500.00 \$0.00 Last 4 digits of account number Priority Creditor's Name PO Box 64338 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent 60664 Unliquidated Chicago Illinois Zip Code City State Disputed Who incurred the debt? Check one. Type of PRIORITY unsecured claim: Debtor 1 only Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were intoxicated Check if this claim relates to a community debt Is the claim subject to offset? Other. Specify ◪ No Yes

Doc 1 Sheila Case 16-23754 Debtor 1 Document Page 37 of 74 List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. ◪ List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of **Total claim** 4.1 AMERICAN CREDIT ACCEPT \$8,200.00 Last 4 digits of account number _ Nonpriority Creditor's Name 961 E MAIN ST When was the debt incurred? 7/1/2014 Street Number As of the date you file, the claim is: Check all that apply. Contingent 29302 **SPARTANBURG** South Carolina Unliquidated Zip Code Citv State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt 036 Automobile Other. Specify Is the claim subject to offset? **✓** No Yes **Americash** \$962.23 Last 4 digits of account number Nonpriority Creditor's Name 555 Torrence Avenue When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Calumet City Illinois 60409 Unliquidated Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify_ Is the claim subject to offset? Payday Loan **V** No City of Chicago Parking \$1,728.40 Last 4 digits of account number Nonpriority Creditor's Name 121 N. LaŠalle St # 107A When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Chicago Illinois 60602 City State Zip Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that Debtor 1 and Debtor 2 only you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Tickets Other. Specify_ Is the claim subject to offset?

✓ No Yes

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Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.4 \$350.00 Last 4 digits of account number Nonpriority Creditor's Name 11621 E. Marginal Way # 5 When was the debt incurred? n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Seattle Washington 98168 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only V Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that Debtor 1 and Debtor 2 only you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Due Is the claim subject to offset? **V** No Yes 4.5 **CREDIT PROTECTION ASSO** \$4,435.00 Last 4 digits of account number 3529 Nonpriority Creditor's Name 1355 NOEL RD SUITE 2100 When was the debt incurred? 2/1/2013 Number Street As of the date you file, the claim is: Check all that apply. Contingent Texas 75240 DALLAS Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed ✓ Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt 001 Collection; Collecting for ORIGINAL CREDITOR: PEOPLES GAS LIGHT **V** Is the claim subject to offset? **✓** No COKE CO Other. Specify Yes **CREDIT PROTECTION ASSO** \$384.00 Last 4 digits of account number 3706 Nonpriority Creditor's Name 1355 NOEL RD SUITE 2100 When was the debt incurred? 2/1/2016 Number Street As of the date you file, the claim is: Check all that apply. Contingent **DALLAS** 75240 Texas Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts 001 Collection; Collecting for ORIGINAL CREDITOR: COMMONWEALTH EDISON COMPANY **V** Is the claim subject to offset?

✓ No

Yes

Other, Specify

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Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

| | After listing any entries on this page, number them beginning | with 4.5, followed by 4.6, and so forth. | Total claim |
|-----|---|---|-------------|
| 4.7 | DIVERSIFIED Nonpriority Creditor's Name Po Box 1391 Number Street Southgate Michigan 48195 City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt Is the claim subject to offset? ✓ No | Last 4 digits of account number 2106 When was the debt incurred? 11/1/2013 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Collection; Collecting for ORIGINAL Other. Specify CREDITOR: 11 US CELLULAR | \$807.00 |
| 4.8 | Illinois Tollway Nonpriority Creditor's Name 2700 Ogden Ave Number Street | Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. | \$500.00 |
| | Downers Grove Illinois 60515 City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? ✓ No Yes | Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Tolls | |
| 4.9 | Nonpriority Creditor's Name | Last 4 digits of account number When was the debt incurred? | \$7,289.28 |

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Page 40 of 74 Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 \$2,654.00 Last 4 digits of account number 0529 Nonpriority Creditor's Name 1002 ARTHUR DR When was the debt incurred? 1/1/2010 Number Street As of the date you file, the claim is: Check all that apply. Contingent LYNN HAVEN Florida 32444 Unliquidated State Zip Code City Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other. Specify **✓** No Yes 4.11 \$2,000.00 Last 4 digits of account number Nonpriority Creditor's Name 1002 ARTHUR DR When was the debt incurred? 1/1/2010 Number Street As of the date you file, the claim is: Check all that apply. Contingent LYNN HAVEN 32444 Florida Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Is the claim subject to offset? **✓** No ☐ Yes 4.12 Navient \$1,327.00 Last 4 digits of account number Nonpriority Creditor's Name 1002 ARTHUR DR When was the debt incurred? 1/1/2010 Street Number As of the date you file, the claim is: Check all that apply. Contingent LYNN HAVEN 32444 Florida Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans

✓ No Yes

Debtor 1 and Debtor 2 only

Is the claim subject to offset?

At least one of the debtors and another

Check if this claim relates to a community debt

Obligations arising out of a separation agreement or divorce

Debts to pension or profit-sharing plans, and other similar debts

that you did not report as priority claims

Other. Specify

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| i dila | Tour NONF KIOKITT Offsecured Claims - Continua | non rago | |
|--------|---|---|-----------------|
| | After listing any entries on this page, number them beginning w | vith 4.5, followed by 4.6, and so forth. | Total claim |
| 4.13 | PEOPLES ENGY | Last 4 digits of account number 6509 | \$4,508.00 |
| | Nonpriority Creditor's Name 200 EAST RANDOLPH | When was the debt incurred? 8/1/2010 | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | CHICAGO Illinois 60601 | Contingent | |
| | City State Zip Code | Unliquidated | |
| | Who incurred the debt? Check one. Debtor 1 only | Disputed | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | Check if this claim relates to a community debt | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | ✓ Other. Specify InstallmentLoan | |
| | No | This could be a second by the | |
| | Yes | | |
| 4 14 | PEOPLES ENGY | | ¢4.005.00 |
| 4.14 | Nonpriority Creditor's Name | Last 4 digits of account number 5246 | \$1,005.00 |
| | 200 EAST RANDOLPH Number Street | When was the debt incurred? 10/1/2008 | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | CHICAGO Illinois 60601 City State Zip Code | Unliquidated | |
| | Who incurred the debt? Check one. | Disputed | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | 님 | Debts to pension or profit-sharing plans, and other similar debts | |
| | Check if this claim relates to a community debt | Other. Specify InstallmentLoan | |
| | Is the claim subject to offset? | Other. Specify | |
| | Yes | | |
| 4.45 | - | | 0.450.00 |
| 4.15 | Sprint Nonpriority Creditor's Name | Last 4 digits of account number | \$150.00 |
| | P.O. Box 219554 | When was the debt incurred?n/a | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Kansas CityMissouri64121CityStateZip Code | Unliquidated | |
| | Who incurred the debt? Check one. | Disputed | |
| | ✓ Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | ✓ Other. Specify Cell | |
| | ✓ No | <u> </u> | |
| | ☐ Yes | | |

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Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

| | ū | | | | | | |
|-------|---|--|-------------|--|--|--|--|
| | After listing any entries on this page, number them beginning w | ith 4.5, followed by 4.6, and so forth. | Total claim | | | | |
| 4.16 | UNIVERSAL ACCEPTANCE C Nonpriority Creditor's Name 10801 RED CIRCLE DR Number Street MINNETONKA Minnesota 55343 City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? | Last 4 digits of account number | \$4,980.47 | | | | |
| 4.17 | ✓ No ☐ Yes WOW | | фого oo | | | | |
| 4.17] | Nonpriority Creditor's Name PO Box 4350 Number Street | Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent | \$350.00 | | | | |
| | Carol Stream Illinois 60197 City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? ✓ No | Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify Due | | | | | |
| | Voc | | | | | | |

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Debt That You Already Listed

| LIST OTHERS | to be Notified | About a Debt In | at 100 Alleady Listed | | |
|---|----------------|-----------------|---|--|--|
| 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For e collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditor not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. | | | | | |
| HARRIS & HARR Name | RIS LTD | | On which entry in Part 1 or Part 2 did you list the original creditor? | | |
| 111 W JACKSON | BLVD S-400 | | Line 4.3 of (Check one): Part 1: Creditors with Priority Unsecured Claims | | |
| Number Stree | Number Street | | Part 2: Creditors with Nonpriority Unsecured Claims | | |
| CHICAGO | Illinois | 60604 | Last 4 digits of account number | | |
| City | State | Zip Code | | | |

Debtor 1 Sheila Case 16-23754 Doc 1 Filed 07\$25/16 Entered 07\$25/16 (0.3:00:39 Desc Main First Name Documentum Page 44 of 74 Add the Amounts for Each Type of Unsecured Claim

| | mounts of certain types of unsecured claims. This information is fo nounts for each type of unsecured claim. | r sta | ntistical reporting purposes only. 28 U.S.C. §159. |
|-----------------------------|--|-------|--|
| | | | Total claims |
| Total claims from Part 1 | 6a. Domestic support obligations. | 6a. | \$0.00 |
| nom runt i | 6b. Taxes and certain other debts you owe the government | 6b. | \$500.00 |
| | 6c. Claims for death or personal injury while you were intoxicated | 6c. | \$0.00 |
| | 6d. Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$0.00 |
| | 6e. Total. Add lines 6a through 6d. | 6e. | \$500.00 |
| | | | Total claims |
| Total claims from Part 2 | 6f. Student loans | 6f. | \$5,981.00 |
| | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$0.00 |
| | 6h. Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$0.00 |
| | 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$35,649.38 |
| | 6j. Total. Add lines 6f through 6i. | 6j. | \$41,630.38 |

Case 16-23754 Doc 1 Filed 07/25/16 Entered 07/25/16 13:00:39 Desc Main Fill in this information to identify your case: Debtor 1 Sheila Smith First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name Northern United States Bankruptcy Court for the: District of Illinois (State) Case number (If known) Check if this is an Official Form 106G amended filing Schedule G: Executory Contracts and Unexpired Leases Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known). 1. Do you have any executory contracts or unexpired leases? No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form. Ses. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B). 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or com | pany with whom you have th | ne contract or lease | State what the contract or lease is for |
|-----|----------------------|----------------------------|----------------------|--|
| 2.1 | Paper Street Name | | | Residential Lease, Other, Year to Year Lease |
| | 7738 S Colfax | | | |
| | Number | Street | | |
| | Chicago | Illinois | 60649 | |
| | City | State | Zip Code | |

Case 16-23754 Doc 1 Filed 07/25/16 Entered 07/25/16 13:00:39 Desc Main Fill in this information to identify your case: Debtor 1 Sheila Smith First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) Case number (If known) Check if this is an amended filing Official Form 106H Schedule H: Your Codebtors 12/15 Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible, if two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question. 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.) \square Nο Yes 2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No. Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? Yes. In which community state or territory did you live? ____ _____ Fill in the name and current address of that person. Name of your spouse, former spouse, or legal equivalent

as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filling with you. List the person shown in line 2 again

Zip Code

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

State

Number Street

Citv

Case 16-23754 Doc 1 Filed 07/25/16 Entered 07/25/16 13:00:39 Desc Main Fill in this information to identify your case: Debtor 1 Sheila Smith First Name Middle Name Last Name Check if this is: Debtor 2 (Spouse, if filing) First Name An amended filing Middle Name Last Name A supplement showing post-petition chapter 13 United States Bankruptcy Court for the: Northern District of Illinois expenses as of the following date: (State) Case number MM / DD / YYYY (If known) Official Form 106I Schedule I: Your Income 12/15 Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Employment **Debtor 1** Debtor 2 1. Fill in your employment information. **Employment status** ✓ Employed Employed If you have more than one Not Employed Not Employed job, attach a separate page with Occupation Care Provider information about additional employers. Senior Bridge Employer's name Include part time, seasonal, **Employer's address** 845 N. Michigan Suite 1418 Number Street Number Street self-employed work. Occupation may include student or homemaker, if it applies. 60611 Chicago Illinois City Zip Code Zip Code State 1 year How long employed there? Part 2: **Give Details About Monthly Income** Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 2 or For Debtor 1 non-filing spouse

\$2,035.02 deductions.) If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 3. + \$0.00 Calculate gross income. Add line 2 + line 3. \$2,035.02

2. List monthly gross wages, salary, and commissions (before all payroll

Entered @2625/166 123:00:39 Debtor 1 Sheila Case 16-23754 Doc 1 Filed 07\$25/16 First Name Middle Name Documentame Page 48 of 74 For Debtor 2 or For Debtor 1 non-filing spouse \$2,035.02 Copy line 4 here 5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5a. \$268.84 5b. Mandatory contributions for retirement plans 5b. \$0.00 5c. Voluntary contributions for retirement plans 5c \$0.00 5d. Required repayments of retirement fund loans 5d. \$0.00 5e. \$0.00 5e. Insurance 5f. Domestic support obligations 5f. \$0.00 5g. 5a. Union dues \$0.00 5h. Other deductions. Specify: 5h. \$0.00 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. 6. \$268.84 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$1,766.18 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total \$0.00 monthly net income. 8a. 8b. \$0.00 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce \$0.00 80 settlement, and property settlement. 8d. Unemployment compensation 8d. \$0.00 8e. Social Security 8e. \$0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies \$238.00 Specify: Food Assistance Programs Income 8f. 8g. Pension or retirement income 8g. \$733.00 8h. Other monthly income. Specify: 8h. \$0.00 9. Add all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. \$971.00 9. 10. Calculate monthly income. Add line 7 + line 9. 10. \$2,737.18 \$2,737.18 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. \$0.00 11. + 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. 12. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? No. Yes. Explain:

Case 16-23754 Doc 1 Filed 07/25/16 Entered 07/25/16 13:00:39 Desc Main Fill in this information to identify your case: Debtor 1 Sheila Smith First Name Middle Name Last Name Check if this is: Debtor 2 (Spouse, if filing) First Name Middle Name Last Name An amended filing A supplement showing post-petition chapter 13 United States Bankruptcy Court for the: Northern District of Illinois expenses as of the following date: (State) Case number (If known) MM / DD / YYYY Official Form 106J Schedule J: Your Expenses 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Your Household 1. Is this a joint case? ✓ No. Go to line 2 Yes. Does Debtor 2 live in a separate household? No Yes. Debtor 2 must file Official Forms 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? Do not list Debtor 1 and Yes. Fill out this information for Dependent's relationship to Dependent's Does dependent live Debtor 2. each dependent Debtor 1 or Debtor 2 with you? age No. Child 22 years Yes. No. Child 20 years ✓ Yes. No. Child 16 years Yes. No. Child 5 years ✓ Yes. 3. Do vour expenses include **✓** No expenses of people other than Yes yourself and your dependents? Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of Your expenses such assistance and have included it on Schedule I: Your Income (Official Form B 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and \$400.00 any rent for the ground or lot. 4. 4. If not included in line 4: 4a. Real estate taxes \$0.00 4a 4b. Property, homeowner's, or renter's insurance \$40.00 4b. 4c. Home maintenance, repair, and upkeep expenses \$0.00 4c.

\$0.00

4d

4d. Homeowner's association or condominium dues

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| Document Page 50 01 74 | | |
|--|-----|---------------|
| | | Your expenses |
| 5. Additional mortgage payments for your residence, such as home equity loans | 5. | \$0.00 |
| 6. Utilities: | | |
| 6a. Electricity, heat, natural gas | 6a. | \$215.00 |
| 6b. Water, sewer, garbage collection | 6b. | \$0.00 |
| 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c. | \$157.00 |
| 6d. Other. Specify: | 6d | \$0.00 |
| 7. Food and housekeeping supplies | 7. | \$450.00 |
| 8. Childcare and children's education costs | 8. | \$0.00 |
| 9. Clothing, laundry, and dry cleaning | 9. | \$50.00 |
| 10. Personal care products and services | 10. | \$50.00 |
| 11. Medical and dental expenses | 11. | \$0.00 |
| Transportation. Include gas, maintenance, bus or train fare. Do not include car payments | 12. | \$300.00 |
| 13. Entertainment, clubs, recreation, newspapers, magazines, and books | 13. | \$0.00 |
| 14. Charitable contributions and religious donations | 14. | \$0.00 |
| 15. Insurance.Do not include insurance deducted from your pay or included in lines 4 or 20. | | |
| 15a. Life insurance | 15a | \$70.00 |
| 15b. Health insurance | 15b | \$0.00 |
| 15c. Vehicle insurance | 15c | \$220.00 |
| 15d. Other insurance. Specify: | 15d | \$0.00 |
| 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. | | |
| Specify: | 16 | \$0.00 |
| 17. Installment or lease payments: | 10 | |
| 17a. Car payments for Vehicle 1 | 17a | \$0.00 |
| 17b. Car payments for Vehicle 2 | 17b | \$0.00 |
| 17c. Other. Specify: | 17c | \$0.00 |
| 17d. Other. Specify: | 17d | \$0.00 |
| 18. Your payments of alimony, maintenance, and support that you did not report as deducted from | | \$0.00 |
| your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. | |
| 19.Other payments you make to support others who do not live with you. | | |
| Specify: | 19. | \$0.00 |
| 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. | | . |
| 20a. Mortgages on other property | 20a | \$0.00 |
| 20b. Real estate taxes. | 20b | \$0.00 |
| 20c. Property, homeowner's, or renter's insurance | 20c | \$0.00 |
| 20d. Maintenance, repair, and upkeep expenses. | 20d | \$0.00 |
| 20e. Homeowner's association or condominium dues | 20e | \$0.00 |

| Debtor 1 | Sheila Case 16-23754 Doc 1 Filed 07\$25/16 Entered @7\$25/16 @300:39 | Desc Main | |
|--------------------|--|-----------|------------|
| 21. Other . | | 21 | \$0.00 |
| | | | |
| 22. Calcu | ate your monthly expenses. | | \$1,952.00 |
| 22a. A | dd lines 4 through 21. | _ | \$0.00 |
| 22b. C | opy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | | \$1,952.00 |
| 22c. A | dd line 22a and 22b. The result is your monthly expenses. | 22. | |
| 23. Calcu | ate your monthly net income. | | |
| 23a. C | opy line 12 (your combined monthly income) from Schedule I. | 23a | \$2,737.18 |
| 23b. C | opy your monthly expenses from line 22 above. | 23b | \$1,952.00 |
| | ubtract your monthly expenses from your monthly income. | | \$785.18 |
| | he result is your monthly net income. | 23c | |
| 24. Do yo | u expect an increase or decrease in your expenses within the year after you file this form? | | |
| For e | cample, do you expect to finish paying for your car loan within the year or do you expect your | | |
| | age payment to increase or decrease because of a modification to the terms of your mortgage? | | |
| ✓ N | 0 | | |
| П | es · | | |
| _ | Explain here: | | |
| | Explain 1616. | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

Case 16-23754 Doc 1 Filed 07/25/16 Entered 07/25/16 13:00:39 Desc Main Fill in this information to identify your case: Debtor 1 Sheila Smith First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name Northern District of Illinois United States Bankruptcy Court for the: (State) Case number (If known) Check if this is an Official Form 106Dec amended filing **Declaration About an Individual Debtor's Schedules** 12/15 If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Part 1: Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? **✓** No Attach Bankruptcy Petition Preparer's Notice, Declaration, and Yes. Name of person Signature (Official Form 119). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

Signature of Debtor 2

MM/DD/YYYY

/s/ Sheila Smith

Date 7/25/2016

Signature of Debtor 1

MM/DD/YYYY

Case 16-23754 Doc 1 Filed 07/25/16 Entered 07/25/16 13:00:39 Desc Main Fill in this information to identify your case: Debtor 1 Sheila Smith First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) Case number (If known) Check if this is an Official Form 107 amended filing Statement of Financial Affairs for Individuals Filing for Bankruptcy 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before What is your current marital status? Married ✓ Not married During the last 3 years, have you lived anywhere other than where you live now? Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1: Dates Debtor 1 lived Debtor 2: **Dates Debtor 2 lived** there there Same as Debtor 1 Same as Debtor 1 8713 S. Buffalo From 8/1/2008 From __ Number Street Number Street 6/15/2016 60615 Chicago Illinois City State Zip Code City State Zip Code Same as Debtor 1 Same as Debtor 1 From Number Street Number Street То City State Zip Code City State Zip Code 3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

Debtor 1 Sheila Case 16-23754 Doc 1 Filed 07\$25/16 Entered 0₹/25/16 @300:39 Desc Main

| Did you have any income from employme Fill in the total amount of income you receive activities. If you are filing a joint case and you No Yes. Fill in the details. | d from all jobs and all busine | esses, including part-time | | ars? |
|---|--|---|--|---|
| | Debtor 1 | | Debtor 2 | |
| | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| From January 1 of current year until the date you filed for bankruptcy: | ✓ Wages, commissions, bonuses, tips ☐ Operating a business | \$6826.13 | Wages, commissions, bonuses, tips Operating a business | |
| For last calendar year: (January 1 to December 31, | Wages, commissions, bonuses, tips Operating a business | \$20000.00 | Wages, commissions, bonuses, tips Operating a business | |
| For the calendar year before that: (January 1 to December 31, 2014) YYYY | Wages, commissions, bonuses, tips Operating a business | \$20000.00 | Wages, commissions, bonuses, tips Operating a business | |
| Include income regardless of whether that income benefit payments; pensions; rental income; into and you have income that you received together List each source and the gross income from e No Yes. Fill in the details. | erest; dividends; money col er, list it only once under Deb | lected from lawsuits; royalties; a otor 1. | nd gambling and lottery winnir | |
| | Debtor 1 | | Debtor 2 | |
| | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of income Describe below. | Gross income from each source (before deductions an exclusions) |
| From January 1 of current year until the date you filed for bankruptcy: | (Est.) YTD Social Security (Est.) YTD Link | \$4,398.00 \$1,428.00 | | |
| For last calendar year: (January 1 to December 31, 2015) YYYY | (Est.) YTD Social Security (Est.) YTD Link | \$8,796.00 \$2,856.00 | | |
| For the calendar year before that: (January 1 to December 31. 2014) | (Est.) YTD Social Security | \$8,796.00 | | |

(January 1 to December 31,

2014

\$2,856.00

(Est.) YTD Link

| Par | 13: List Certain | n Payment | s You Made Be | efore You Filed for B | Bankruptcy | | | | |
|-----|---|----------------|------------------------|------------------------------|--|---------------------------------|-------------------------------|--|--|
| 6. | Are either Debtor | 1's or Debtor | r 2's debts primari | ly consumer debts? | | | | | |
| | | | Debtor 2 has prim | • | onsumer debts are defined ir | n 11 U.S.C. § 101(8) as "incurr | ed by an individual primarily | | |
| | During the | e 90 days befo | ore you filed for bank | kruptcy, did you pay any cre | ditor a total of \$6,425* or mor | e? | | | |
| | ∏ No. 0 | So to line 7. | | | | | | | |
| | Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. | | | | | | | | |
| | * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. | | | | | | | | |
| | Yes. Debtor 1 | or Debtor 2 | or both have prim | narily consumer debts. | | | | | |
| | During the | e 90 days befo | ore you filed for bank | kruptcy, did you pay any cre | ditor a total of \$600 or more? | | | | |
| | ✓ No. 0 | Go to line 7. | | | | | | | |
| | Yes | that creditor. | . Do not include pay | | more and the total amount you t obligations, such as child so s bankruptcy case. | | | | |
| | | | | Dates of payment | Total amount paid | Amount you still owe | Was this payment for | | |
| | Creditor's Nar | ne | | | | | Mortgage | | |
| | Number Stree | et . | | | | | Car Credit card | | |
| | | | | | | | Loan repayment | | |
| | 0" | | | | | | Suppliers or | | |
| | City | State | Zip Code | | | | vendors Other | | |
| | One dite de Neu | | | | - | | Mortgage | | |
| | Creditor's Nar | ne | | | | | Car | | |
| | Number Stree | et | | | | | Credit card | | |
| | | | <u> </u> | | | | Loan repayment | | |
| | City | State | Zip Code | | | | Suppliers or vendors | | |
| | | | | | | | Other | | |
| | Creditor's Nar | ne | | | | | Mortgage | | |
| | Number Stree | et . | | | | | Car Credit card | | |
| | | ·• | | | | | Loan repayment | | |
| | | | | | | | Suppliers or | | |
| | City | State | Zip Code | | | | vendors Other | | |
| | | | | | | | U Otner | | |

Filed 07\$25/16 Entered 07\$25/16 A& 00:39 Desc Main Doc 1 Debtor 1 Document Page 56 of 74 Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Yes. List all payments to an insider. Dates of Amount you still Reason for this payment Total amount payment paid owe Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments that benefited an insider. Dates of Total amount Amount you still Reason for this payment paid payment owe Include creditor's name Insider's Name Number Street Zip Code City State Insider's Name Number Street City State Zip Code

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Part 4: Identify Legal Actions, Repossessions, and Foreclosures

| ✓ No Yes. Fill in the details. | | | | | | |
|--|-------------------|---|--|------------|----------|------------------------|
| | Na | ture of the case | Court or | agency | | Status of the case |
| Case title | | | | | | Pending |
| | | | Court Nar | me | | On appeal |
| Case number | | | Number S | Stroot | | Concluded |
| | | | Numbers | oueet | | _ |
| | | | City | State | Zip Code | |
| Case title | | | | | | Pending |
| | | | Court Nar | me | | On appeal |
| Case number | | | NumberS | Street | | Concluded |
| | | | | | | |
| | | | City | State | Zip Code | |
| ✓ No. Go to line 11. Yes. Fill in the information be | elow. | Describe the pro | pperty | | Date | Value of the |
| <u></u> | elow. | Describe the pro | pperty | | Date | Value of the property |
| | elow. | Describe the pro | pperty | | Date | |
| Yes. Fill in the information be | elow. | Describe the pro | | | Date | |
| Yes. Fill in the information be | elow. | Explain what ha | ppened | | Date | |
| Yes. Fill in the information be Creditor's Name | elow. | Explain what ha | ppened repossessed. | | Date | |
| Yes. Fill in the information be Creditor's Name | elow. | Explain what ha Property was Property was | ppened repossessed. foreclosed. | | Date | |
| Yes. Fill in the information be Creditor's Name | elow. Zip Code | Explain what ha Property was Property was Property was | ppened repossessed. foreclosed. | or levied. | Date | |
| Yes. Fill in the information be Creditor's Name Number Street | | Explain what ha Property was Property was Property was | ppened repossessed. foreclosed. garnished. attached, seized, | or levied. | Date | |
| Yes. Fill in the information be Creditor's Name Number Street City State | | Explain what ha Property was Property was Property was Property was | ppened repossessed. foreclosed. garnished. attached, seized, | or levied. | | Property Value of the |
| Yes. Fill in the information be Creditor's Name Number Street | | Explain what ha Property was Property was Property was Property was Property was Describe the pro | repossessed. foreclosed. garnished. attached, seized, | or levied. | | Property Value of the |
| Yes. Fill in the information be Creditor's Name Number Street City State Creditor's Name | | Explain what ha Property was Property was Property was Property was | repossessed. foreclosed. garnished. attached, seized, | or levied. | | Property Value of the |
| Yes. Fill in the information be Creditor's Name Number Street City State | | Explain what ha Property was Property was Property was Property was Describe the pro Explain what ha | ppened repossessed. foreclosed. garnished. attached, seized, pperty | or levied. | | Property Value of the |
| Yes. Fill in the information be Creditor's Name Number Street City State Creditor's Name | | Explain what ha Property was Property was Property was Property was Describe the pro Explain what ha | repossessed. foreclosed. garnished. attached, seized, pperty ppened | or levied. | | Property Value of the |
| Yes. Fill in the information be Creditor's Name Number Street City State Creditor's Name | | Explain what ha Property was Property was Property was Property was Property was Explain what ha Property was | ppened repossessed. foreclosed. garnished. attached, seized, pperty ppened repossessed. foreclosed. | or levied. | | Property Value of the |

| Deb | tor 1 | | <u>d 07ଛ25/16 Entered</u> 0 <i>ଅ</i> /25/16 <i>୩</i> ଥି:00 ocument Page 58 of 74 | 0: <u>39 Desc</u> | Main |
|------|----------|---|---|-----------------------|-------------------------|
| 11. | | | creditor, including a bank or financial institution, set | off any amounts fr | om your |
| | H | Yes. Fill in the details. | | | |
| | | | Describe the action the creditor took | Date action was taken | Amount |
| | | Creditor's Name | | | |
| | | Crounds of Name | | | |
| | | Number Street | | | |
| | | | Last 4 digits of account number: XXXX- | | |
| | | | | | |
| | | City State Zip Code | | | |
| 12. | | in 1 year before you filed for bankruptcy, was any c iver, a custodian, or another official? | of your property in the possession of an assignee for | the benefit of credi | tors, a court-appointed |
| | ✓ | No | | | |
| | | Yes | | | |
| Part | 5: | List Certain Gifts and Contributions | | | |
| 40 | | | | | |
| 13. | VVII | thin 2 years before you filed for bankruptcy, did you | give any gifts with a total value of more than \$600 pe | r person? | |
| | ✓ | No | | | |
| | Ш | Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 | Describe the gifts | Dates you | Value |
| | | per person | bescribe the girts | gave the gifts | value |
| | | | | | |
| | | Person to Whom You Gave the Gift | | | |
| | | | | | |
| | | Number Street | | | |
| | | City State Zip Code | | | |
| | | Person's relationship to you | | | |
| | | | | | |
| | | Person to Whom You Gave the Gift | | | |
| | | | | | |
| | | Number Street | | | |
| | | City State Zip Code | | | |
| | | Person's relationship to you | | | |
| | | | | | |

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|------|----------|---|--------------------|------------------------|--|-------------------------------------|------------------------------------|
| 14. | Wit | hin 2 years before you filed for b | ankruptcy, did you | ı give any gifts or co | ontributions with a total value of m | ore than \$600 to a | ny charity? |
| | ✓ | No | | | | | |
| | | Yes. Fill in the details for each gift | | | | | |
| | | Gifts with a total value of more per person | than \$600 | Describe the gift | s | Dates you gave the gifts | Value |
| | | Charity's Name | | | | | |
| | | | | | | | |
| | | Number Street | | | | | |
| | | City State | Zip Code | | | | |
| Part | 6. | List Certain Losses | • | | | ı | |
| 15. | gam | nin 1 year before you filed for bar abling? No Yes. Fill in the details. Describe the property you lost | | | ptcy, did you lose anything becaus | e of theft, fire, oth Date of your | er disaster, or Value of property |
| | | how the loss occurred | | | t that insurance has paid. List claims on line 33 of <i>Schedule A/B</i> : | loss | lost |
| | | | | | | | |
| Part | 7. | List Certain Payments or T | ransfers | | | | |
| | | king bankruptcy or preparing a bide any attorneys, bankruptcy petition No Yes. Fill in the details. | | dit counseling agencie | es for services required in your bankru | Date payment or transfer was made | Amount of payment |
| | | Semrad Law Firm | | Attorney's Fee - 350 | 0.00 | 7/25/2016 | \$350.00 |
| | | Person Who Was Paid 20 South Clark Street 28th Floor Number Street | | | | | |
| | | Chicago Illinois | 60606 | | | | |
| | | City State | Zip Code | | | | |
| | | Email or website address | | | | | |
| | | Person Who Made the Payment, if | Not You | | | | |
| | | Person Who Was Paid | | | | | |
| | | Number Street | | | | | |
| | | | | | | | |
| | | City State | Zip Code | | | | |
| | | Email or website address | | | | | |
| | | Person Who Made the Payment, if | Not You | | | | |

| Deb | tor 1 | Sheila Case 16-23754 First Name | Doc 1 Fil | led 07\$25/16 Documenter | Entered ଫୁୟଥିଏ Page 60 of 74 | M6/48:00 | D: <u>39 Desc</u> | <u>Main</u> | |
|-----|----------------------|---|--|----------------------------------|---------------------------------|------------------------------------|--|-------------|------------------------|
| 17. | you Do n | nin 1 year before you filed for ba deal with your creditors or to ma not include any payment or transfer to No | ake payments to y | our creditors? | ng on your behalf pay o | or transfer any | property to anyo | ne who | promised to help |
| | H | Yes. Fill in the details. | | | | | | | |
| | _ | | | Description and | l value of any property | transferred | Date payment or transfer was made | Amou | nt of payment |
| | | Person Who Was Paid | | | | | | | |
| | | Number Street | | | | | | | |
| | | City State | Zip Code | | | | | | |
| 18. | ordi Inclu | nin 2 years before you filed for be nary course of your business or de both outright transfers and transfers that you have already listed on No Yes. Fill in the details. | financial affairs? sfers made as secu | | | | | | |
| | | | | Description and property transfe | | Describe any received or cexchange | property or paym debts paid in | nents | Date transfer was made |
| | | Person Who Received Transfer | | | | | | | |
| | | Number Street | | | | | | | |
| | | City State Person's relationship to you | Zip Code | | | | | | |
| | | Person Who Received Transfer | | | | | | | |
| | | Number Street | | | | | | | |
| | | City State Person's relationship to you | Zip Code | | | | | | |
| 19. | | nin 10 years before you filed for se are often called asset-protection | | ou transfer any prop | perty to a self-settled tru | ust or similar o | device of which yo | ou are a | beneficiary? |
| | ✓ | No Yes. Fill in the details. | | | | | | | |
| | | | | Description ar | nd value of the property | transferred | | | Date transfer was made |
| | | Name of trust | | | | | | | |
| | | | | | | | | | |

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List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Type of account or Last 4 digits of account Last balance Date number instrument account was before closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other Citv State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? Name of Financial Institution Name Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Storage Facility Name Yes

City

Number Street

State

Number

City

Zip Code

Street

State

Zip Code

| Deb | | Sheila Case 16-23754 Doc 1 First Name Middle Name | Filed 07\$25/16 Entered 07\$2 Document Page 62 of 74 | | n |
|------|----------|--|--|---|------------------|
| Part | | Identify Property You Hold or Contro | | | |
| 23. | Do y | | e else owns? Include any property you borro | wed from, are storing for, or hold in tru | ıst for someone. |
| | 씜 | No Yes. Fill in the details. | | | |
| | _ | | Where is the property? | Describe the contents | Value |
| | | Owner's Name | Number Street | | |
| | | Owners that the | Number Street | | |
| | | Number Street | | | |
| | | | City State Zip Code | | |
| | | City State Zip Code | | | |
| Part | 10. | Give Details About Environmental li | nformation | | |
| | | | | | |
| FUI | · | urpose of Part 10, the following definitions apply: | al statute or regulation concerning pollution, contains | mination ralesces of | |
| | ha | The state of the s | al statute or regulation concerning pollution, contar into the air, land, soil, surface water, groundwater, anup of these substances, wastes, or material. | | |
| | | ite means any location, facility, or property as define r used to own, operate, or utilize it, including dispo | ed under any environmental law, whether you now osal sites. | own, operate, or utilize it | |
| | ■ H | lazardous material means anything an environmen | ital law defines as a hazardous waste, hazardous s | substance, | |
| | to | xic substance, hazardous material, pollutant, cont | aminant, or similar term. | | |
| Rep | ort a | ll notices, releases, and proceedings that you know | v about, regardless of when they occurred. | | |
| 24. | Has | any governmental unit notified you that you | may be liable or potentially liable under or in | violation of an environmental law? | |
| | | No | , | | |
| | H | Yes. Fill in the details. | | | |
| | | | Governmental unit | Environmental law, if you know it | Date of |
| | | | | | notice |
| | | Name of site | Governmental unit | | |
| | | Number Street | Number Street | | |
| | | | City State Zip Code | | |
| | | | City State Zip Code | | |
| | | City State Zip Code | | | |
| 25. | Hav | e you notified any governmental unit of any r | elease of hazardous material? | | |
| | ✓ | No | | | |
| | | Yes. Fill in the details. | | | 5. |
| | | | Governmental unit | Environmental law, if you know it | Date of notice |
| | | Name of site | Commencental unit | | |
| | | Name of site | Governmental unit | | |
| | | Number Street | Number Street | | |
| | | | City State Zip Code | | |
| | | City State Zip Code | , | | |
| | | Oily Oillo Zip Ooue | | <u> </u> | |

| Debt | or 1 | Sheila Case 16 First Name | <u>-23754</u> | Doc 1 Middle Name | Filed 07\$25/16 Document | <u>Entered</u> 0742 Page 63 of 74 | 25/16/143:00: <u>39</u> | Desc Main | |
|------|---|---|--|---|-------------------------------|--|------------------------------|--|--|
| 26. | Hav | e you been a party i | n any judicia | al or administra | ative proceeding under | any environmental la | aw? Include settlements | s and orders. | |
| | ✓ No ✓ Yes. Fill in the details. | | | | | | | | |
| | _ | | | | Court or agency | | Nature of the case | Status of the case | |
| | | Case title | | | | | | Pending | |
| | | | | | Court Name | | | On appeal | |
| | | Case number | | | Number Street | | | Concluded | |
| | | _ | | | City State | Zip Code | | | |
| Part | art 11: Give Details About Your Business or Connections to Any Business | | | | | | | | |
| 27. | With | A sole proprieto A member of a l A partner in a pa An officer, direct An owner of at le No. None of the above | r or self-emplo limited liability artnership tor, or managi east 5% of the re applies. Go | oyed in a trade, company (LLC ing executive of evoting or equit to Part 12. | y securities of a corporation | ry, either full-time or pa ship (LLP) on | Employer Iounclude Societies | dentification number Do not cial Security number or ITIN. | |
| | | Number Street | | | Name of accour | ntant or bookkeeper | | ness existed | |
| | | City | State | Zip Code | | | From | To | |
| | | | | | Describe the na | ture of the business | | dentification number Do not cial Security number or ITIN. | |
| | | Business Name | | | | | EIN: | | |
| | | Number Street | | | Name of accour | ntant or bookkeeper | | ness existed | |
| | | City | State | Zip Code | | | From | То | |
| | | | | | Describe the na | ture of the business | | dentification number Do not cial Security number or ITIN. | |
| | | Business Name | | | | | EIN: | | |
| | | Number Street | | | Name of accour | ntant or bookkeeper | | ness existed | |
| | | City | State | Zip Code | | · | | То | |

| | | <u>ed 07\$25/16 Entered </u> 07;/25/116 /11:3:00: <u>39 Desc Main</u> | |
|----------|--|--|----|
| | First Name Middle Name | Pocument Page 64 of 74 | |
| | ithin 2 years before you filed for bankruptcy, did you editors, or other parties. No Yes. Fill in the details below. | give a financial statement to anyone about your business? Include all financial institution | s, |
| _ | res. I ill ill the details below. | Date issued | |
| | | Dute 1990ed | |
| | Name | MM/DD/YYYY | |
| | Number Street | _ | |
| | City Code | _ | |
| | City State Zip Code | | |
| Part 12: | Sign Below | | |
| and | correct. I understand that making a false statement | Affairs and any attachments, and I declare under penalty of perjury that the answers are tru t, concealing property, or obtaining money or property by fraud in connection with a aprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. | е |
| | /s/ Sheila Smith | x | |
| | /s/ Sheila Smith Signature of Debtor 1 | Signature of Debtor 2 | |
| | /s/ Shelia Smith | | |
| Did | Signature of Debtor 1 Date 7/25/2016 | Signature of Debtor 2 | |
| ✓ | Signature of Debtor 1 Date 7/25/2016 you attach additional pages to Your Statement of File No | Signature of Debtor 2 Date Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? | |
| ✓ | Signature of Debtor 1 Date 7/25/2016 you attach additional pages to Your Statement of File No Yes | Signature of Debtor 2 Date Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? | |
| ✓ | Signature of Debtor 1 Date 7/25/2016 you attach additional pages to Your Statement of Final No Yes you pay or agree to pay someone who is not an attorior. | Signature of Debtor 2 Date Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| | \$245 | filing fee |
|---|-------|--------------------|
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes:
- most student loans;
- domestic support and property settlement obligations;

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- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form — the Chapter 7 Means Test Calculation (Official Form 122A-2). The calculations on the form— sometimes called the Means Test —deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

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your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | \$1,167 | filing fee |
|---|---------|--------------------|
| + | \$550 | administrative fee |
| | \$1,717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| + | \$75 | administrative fee |
|----------|-------|--------------------|
| <u> </u> | - · | |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| + | \$75 | administrative fee |
|---|-------|--------------------|
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-23754 Doc 1 Filed 07/25/16 Entered 07/25/16 13:00:39 Desc Main Document Page 69 of 74

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UNITED STATES BANKRUPTCY COURT

| Sheila Smith | | Case N | |
|---|--|---|--|
| Deptor | | Chante | (If known) Chapter 13 |
| | | Οπαρισι | Спарсе 13 |
| DISCLOSURE OF | COMPENSAT | ION OF ATTORNE | Y FOR DEBTOR |
| compensation paid to me within one | year before the filing of | f the petition in bankruptcy, or | agreed to be paid to me, for services |
| For legal services, I have agreed to | accept | | \$4,000.00 |
| Prior to the filing of this statement I | have received | | \$350.00 |
| Balance Due | | | \$3,650.00 |
| The source of the compensation paid | d to me was: | | |
| Debtor | Other (spec | cify) | |
| The source of the compensation paid | d to me is: | | |
| Debtor | Other (spec | pify) | |
| I have not agreed to share the a members and associates of my | bove-disclosed comper law firm. | າsation with any other person ເ | unless they are |
| members or associates of my la | w firm. A copy of the a | | |
| | _ | - | |
| b. Preparation and filing of any | petition, schedules, sta | tements of affairs and plan wh | nich may be required; |
| c. Representation of the debtor | at the meeting of credit | ors and confirmation hearing, | and any adjourned hearings thereof; |
| d. Representation of the debtor | in adversary proceedin | gs and other contested bankru | uptcy matters; |
| By agreement with the debtor(s), the | above-disclosed fee d | oes not include the following s | ervices: |
| | | | |
| | CERT | IFICATION | |
| | | reement or arrangement for pa | ayment to me for representation of |
| 7/25/2016 | | /s/ Megan Holmes | |
| Date | | Signature of Attorney | |
| | | - | |
| _ | | Semrad Law Firm Name of law firm | |
| | Disclosure of Pursuant to 11 U.S.C. § 329(a) and Ficompensation paid to me within one rendered or to be rendered on behalf For legal services, I have agreed to Prior to the filing of this statement I Balance Due The source of the compensation paid Debtor The source of the compensation paid Debtor I have not agreed to share the amembers and associates of my lathe people sharing in the compensation bankruptcy; b. Preparation and filing of any paid to the debtor of the de | Disclosure of compensation paid to me within one year before the filing of rendered or to be rendered on behalf of the debtor(s) in conformer to the filing of this statement I have received Balance Due The source of the compensation paid to me was: Debtor Debtor Other (spectable) I have not agreed to share the above-disclosed compensation paid to me is: Debtor Other (spectable) I have not agreed to share the above-disclosed compensation paid to me is: Here agreed to share the above-disclosed compensation paid to me is: I have agreed to share the above-disclosed compensation paid to me is: I have agreed to share the above-disclosed compensation paid to me is: Representation in the compensation, is attached. In return for the above-disclosed fee, I have agreed to rend a. Analysis of the debtor's financial situation, and render bankruptcy; b. Preparation and filling of any petition, schedules, state. Representation of the debtor at the meeting of credit d. Representation of the debtor in adversary proceeding. CERTIC certify that the foregoing is a complete statement of any agreement with the bankruptcy proceedings. | Disclosure of Compensation of Attorne Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney compensation paid to me within one year before the filing of the petition in bankruptcy, or rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection For legal services, I have agreed to accept Prior to the filing of this statement I have received Balance Due The source of the compensation paid to me was: Debtor |

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| n re: | Smith, Sheila | Case No. | | | | |
|-------|--|---|------------------------------------|---------|--|--|
| | Debtor(s) | | | | | |
| | | Chapter. | Chapter13 | | | |
| | VERIFICATION OF CREDITOR MATRIX | | | | | |
| | The above named Debtors hereby verify that | t the attached list of creditors is true ar | nd correct to the best of their kn | owledge | | |
| | | | | | | |
| ate: | 7/25/2016 | /s/ Smith, Sheila | | | | |

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Santander Consumer USA PO Box 961245 Fort Worth , TX 76161 USA

AMERICAN CREDIT ACCEPT c/o Justin McCrorey 961 E. Main St Spartanburg , SC 29302 USA

PEOPLES ENGY 200 EAST RANDOLPH CHICAGO , IL 60601 USA

CREDIT PROTECTION ASSO PO Box 802068 Dallas , TX 75380 USA

Navient 1002 ARTHUR DR LYNN HAVEN , FL 32444 USA

Navient 1002 ARTHUR DR LYNN HAVEN , FL 32444 USA

Navient 1002 ARTHUR DR LYNN HAVEN , FL 32444 USA

PEOPLES ENGY 200 EAST RANDOLPH CHICAGO , IL 60601 USA

DIVERSIFIED Po Box 1391 Southgate , MI 48195 USA

CREDIT PROTECTION ASSO PO Box 802068 Dallas , TX 75380 USA

American First Financial 3515 N Ridge Rd Wichita , KS 67205 USA

Simple Finance 1225 Fort Union Blvd #300 Midvale , UT 84047 USA City of Chicago Parking 121 N. LaSalle St # 107A Chicago , IL 60602 USA

HARRIS & HARRIS LTD 111 W JACKSON BLVD S-400 CHICAGO , IL 60604 USA

UNIVERSAL ACCEPTANCE C 10801 RED CIRCLE DR MINNETONKA , MN 55343 USA

Americash 555 Torrence Avenue Calumet City , IL 60409 USA

Jefferson Capital System PO Box 772813 Chicago , IL 60677 USA

Illinois Department of Revenue PO Box 64338 Chicago , IL 60664 USA

Comcast 11621 E. Marginal Way # 5 Bankruptcy Dept Seattle , WA 98168 USA

WOW PO Box 4350 Carol Stream , IL 60197 USA

Illinois Tollway PO Box 5544 Chicago , IL 60680 USA

Sprint P.O. Box 219554 Kansas City , MO 64121 USA